•	Under the	Paporwork Rod	uction Act of	1995, no persons a	re required to reso	oon			k Office; U	S. DEPARTMEN	T OF COMMER	
	PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-875						ON RECORD			Application or Oock of Humber		
	CLAIMS AS FILED - PART I									- Lee	012	
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	FOR GASIC FEE		INVISER	FREO .	HUNDER EXTRA		RATE	FEE		RATE	FEE	
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	MULTIPLE DE	PENDENT CLAIL		D7 CFR 1.16		٦		-	┥"			
						J	<u> </u>	'	— or	· [+;		
-		If the difference in column 1 is less than zero, enter "O" in column 2.					TOTAL	<u> </u>		TOTAL	<u></u>	
	CLAIMS AS AMENDED - PART II											
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3	FIRST PRESENTATION OF THE TOTAL					┨	×	-	OR	X 5 =		
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d))						+:	<u>/</u>	OR	+:•	1.	
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	,	(Column	<u> </u>	(Column 2	(Column 3)					•		
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TOTAL TOTAL											——	
• 6	ADD'L FEE									ADD'L FEE		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

* The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burners, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patente, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.